BEST AVAILABLE COPY

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number

M-11710US

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE OF			OTHER THAN R SMALL ENTITY	
TOTAL CLAIMS			32					RATE	FEE	1	RATE	FEE
FOR			NUMBER FILED		NUMB	SER EXTRA		BASIC FEE	355.00	OR	BASIC FEE	· 710.00
TOTAL CHARGEABLE CLAIMS			32 minus 20=		• 12			X\$ 9=		OR	X\$18=	2/6
IND	EPENDENT CL	AIMS	3 minus 3 =		* \$			X40=		OR	X80=	
MULTIPLE DEPENDENT CLAIM PRESENT								+135=		OR	. +270=	
* If	the difference	in column 1 is	less than ze	ro, entei	"0" in c	olumn 2	ı	TOTAL		OR	TOTAL	
CLAIMS AS AMENDED - PART II										1	OTHER	THAN
	g white of the state of the sta	(Column 1)		(Colur		(Column 3)		SMALLE	NTITY	OR	SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X40=		OR	X80=	
	FIRST PRESE	NTATION OF MI	JLIIPLE DEF	ENDEN	CLAIM			+135=		OR	+270=	
								TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
(Column 1) (Column 2) (Column 3)											,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X40=		OR	X80=	
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							105			.070	
								+135= TOTAL		OR	+270= TOTAL	
								ADDIT. FEE		OR	ADDIT. FEE	L
_		(Column 1) CLAIMS	Append to the option and		mn 2) HEST	(Column 3)						
AMENDMENT C		REMAINING AFTER AMENDMENT		NUN PREVI	MBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X40=		OR	X80=	
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM]					
	If the entry in activ	mn 1 je lace than 1	he entry in col-	ımn 9 uzril	'≏ "∩" in ~	olumo 3		+135=		OR	+270=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												